

2009 SUMMER READING PROGRAM (SRP)

YOUTH VOLUNTEER APPLICATION

The Carlsbad City Libraries are accepting applications for youth volunteers to assist with the Summer Reading Program (June 22 through August 7). Volunteers sign-up children to participate in the program, listen to children talk about what they've been reading, and help with special programs and events in the library.

You are eligible to be a volunteer if you:

- ◆ are enrolled in the 7th through 12th grades in the fall of 2009 *and*
- ◆ turn in a complete application no later than 5:00 PM on May 22, 2009

Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Email: _____ Grade in 2009/2010: _____

T-shirt size: Adult S ____ Adult M ____ Adult L ____ Adult XL ____

Where would you like to volunteer? Learning Center _____ or Georgina Cole _____

There is a different application for the Carlsbad City Library on Dove Lane.

You may volunteer at only one location.

All volunteers must attend a scheduled training session, even if you have previously been an SRP volunteer. Please bring your calendar and sign-up for training at the Youth Services Desk when you submit your application.

I have read all of the volunteer application and release statements. I understand the SRP volunteer responsibilities and agree to perform the duties as described.

Applicant's signature: _____ Date: _____

Parent's name (please print): _____

Parent's signature: _____ Date: _____

All application documents are due no later than 5:00 PM on FRIDAY, May 22, 2009.

**Please turn in your materials to the Youth Services Desk at
the Georgina Cole Library or the Learning Center.**

For staff use:

Date submitted: _____ *Received by:* _____ *Training date & time:* _____

2009 SUMMER READING PROGRAM (SRP)

Youth Volunteer

"MEMORANDUM OF UNDERSTANDING"

Thank you for applying to be part of our Summer Reading Program! As a youth volunteer with the Carlsbad City Libraries, you agree to:

- ◆ Understand that your first priority is to help children participating in the Summer Reading Program.
- ◆ Represent the library by being polite to all children and their parents, staff members, and your fellow volunteers.
- ◆ Be enthusiastic— help make this a fun and rewarding program for the children.
- ◆ Set an example for the younger patrons; behave properly and use a quiet voice.
- ◆ Dress neatly and wear the SRP Volunteer T-shirt. If you arrive to your shift without your shirt, you will be sent home.
- ◆ Be on time. If you are running late, please call the Youth Services Desk to let us know.
- ◆ Come in to the library to schedule or reschedule when you would like to volunteer. Library Staff will not schedule shifts for you over the phone.
- ◆ Contact the Youth Services Desk as soon as possible if you will not be able to make one of your shifts. You may be removed from the program if you miss a shift without informing a member of the staff ahead of time.
- ◆ Find something quiet to do if you are not helping a child; ask the Youth Services staff if they need help with anything or read. (No IPODs, cell phones, or handheld games while you're volunteering, please).
- ◆ Understand that if a member of the library staff has to speak with you about your behavior or conduct as a volunteer more than once, you may be removed from the program.

Volunteer Name (please print): _____ Date: _____

Volunteer Signature: _____

Please continue to: City of Carlsbad Youth Volunteer Services Agreement and Release
Turn in all signed, completed SRP volunteer application forms to the Youth Services Desk
at the Georgina Cole Library or the Learning Center .

Applications are due no later than 5:00 PM on Friday, May 22, 2009

City of Carlsbad

Youth Volunteer Services Agreement and Release (SRP)

As a youth volunteer with the City of Carlsbad, you agree to:

- ◆ Respect the confidentiality of City information and only discuss or give official information as directed by a supervisor. No confidential information will be provided to the public except within the guidelines of the City.
- ◆ Give the City of Carlsbad, free of any compensation, unlimited permission to use, publish, and republish, in any media now in existence or that may later be developed, for any lawful purpose as it may determine, information and reproductions of my likeness and my voice related to any aspect of my volunteer service for the City. I hereby waive my right to first review the use of my likeness or voice before any use or publication.
- ◆ In the event of an emergency, I hereby give the City of Carlsbad permission to seek medical attention for myself or my child, if volunteer applicant is less than 18 years of age.
- ◆ Understand that there are some risks and that I may be injured in the course of performing these volunteer activities or services for the City. I understand that the City's policy is to cover volunteers as "employees" of the City for sole purpose of California Workers' Compensation benefits. I also understand that under Workers' Compensation laws, Workers' Compensation benefits will be the sole and exclusive remedy in the event I am injured while performing these volunteer activities and services. I further understand and agree that I will only be entitled to medical expenses under the City's Workers' Compensation. I will not be entitled to any other Workers' Compensation benefits which may include, but are not limited to, permanent or temporary loss of use damages, replacement income or vocational rehabilitation benefits. With the exception of Workers' Compensation benefits as set out above, I hereby agree that I, my heirs, guardians, legal representatives and assigns will not make a claim against or file an action against the City of Carlsbad or any of its agents, officers, employees or other volunteers, for injury or damage resulting from negligence, howsoever caused, by any employee, agent, officer or volunteer of the City of Carlsbad as a result of my participation in this volunteer activity or service. In addition, I hereby release and discharge the City of Carlsbad, its agents, officers, employees and other volunteers from all actions, claims and demands that I, my heirs, guardians, legal representatives or assigns now have or may hereafter have for injury or damage resulting from my participation in these volunteer activities or services.

I have carefully read this agreement and fully understand its contents. I am aware that this is a partial release of liability and a contract between myself and the City of Carlsbad and sign it of my own free will.

Volunteer Name (please print)

Age (if under 18 years old)

Volunteer Signature

Date

Signature of parent or guardian (if volunteer is under 18 years of age)

Date

Address (Street/City/Zip)

Phone

EMERGENCY CONTACT

EMERGENCY CONTACT PHONE

Return all signed, completed SRP volunteer application forms to the Youth Services Desk at the Georgina Cole Library or the Learning Center **no later than 5:00 PM on Friday, May 22, 2009**